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FAX COVER SHEET

TO	Art Unit 3652 Examiner Paul Chin
COMPANY	U.S. Patent and Trademark Office
FAX NUMBER	15712738300
FROM	Donald Townsend Jr
DATE	2007-10-24 02:57:39 GMT
RE	U.S. Application Serial No. 10/829,080

COVER MESSAGE

Please find attached hereto an 11-page Amendment After Final, as well as a 1-page Amendment Transmittal, in the above-identified application.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE THE APPLICATION OF: Todd Russell Ingram

SERIAL NO.: 10/829,080

GROUP: 3652

FILED: April 22, 2004

EXAMINER: P. Chin

TITLE: Friction Grip Fireplace Tool

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

SIR:

TRANSMITTED HERewith IS AN ☐ AMENDMENT, ☐ REPLY, ☒ AMENDMENT AFTER FINAL REJECTION IN THE ABOVE IDENTIFIED APPLICATION.

☒ No additional fee is required.

THE FEE HAS BEEN CALCULATED AS SHOWN BELOW:

CLAIMS	REMAINING AFTER AMENDMENT		HIGH.# PREV. PAID FOR	PRESENT EXTRA	SMALL ENTITY RATE ADD'L FEE	OTHER THAN A SMALL ENTITY RATE ADD'L FEE
TOTAL	5	MINUS	20	= 0	X50=\$	X100=\$0
INDEP.	1	MINUS	3	= 0	X100=\$	X200=\$0

<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		+180=\$	+360=\$
	TOTAL ADD'L FEE		-0-

☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-1424. A duplicate copy of this sheet is attached.

- ☒ Any additional filing fees under 37 C.F.R. 1.16 for the presentation of extra claims.
☒ Any patent application processing fees under 37 C.F.R. 1.17.
☒ Any extensions of time under 37 C.F.R. 1.17.

Date: October 23, 2007

Donald E. Townsend, Jr.

Donald E. Townsend, Jr.
Attorney of Record
Registration No. 43,198

TOWNSEND & BANTA
Suite 900, South Building
601 Pennsylvania Ave., N.W.
Washington, D.C. 20004
(202) 220-3124

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In re Application of:
Todd Russell Ingram

Serial No.: 10/829,080

Art Unit: 3652

Filed: April 22, 2004

Examiner: P. Chin

For: **Friction Grip Fireplace Tool**

AMENDMENT AFTER FINAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Responsive to the official final Office Action mailed July 31, 2007, in the matter of the above-identified application, kindly amend the same as follows: